



As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number _5,919,507, granted July 6, 1999 and for which a reissue patent is sought on the invention entitled:

July 0, 1999 and for winch a less.	sue patent is sought on the invention entitied.
PRES	ERVATION COMPOSITIONS AND METHODS FOR MUSHROOMS
the specification of which	
	ched hereto. led on as reissue application number / as amended on (if applicable).
I have reviewed and understand the amendment referred to above. I acknowledge the duty to disclose I verily believe the original patent	the contents of the above identified specification, including the claims, as amended by any se information which is material to patentability as defined in 37 CFR § 1.56. To be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes also of a defective specification or drawing. Son of the patentee claiming more or less than he had the right to claim in the patent. Son of other errors.
that apply.)	
[] by rea [X] by rea [] by rea	son of a defective specification or drawing. son of the patentee claiming more or less than he had the right to claim in the patent. son of other errors.
At least one error upon which reis	sue is based is described below. If the reissue is a broadening reissue, such must be stated with an broadening:
claim in the patent, unduly limits the solutions of erythorbic acid and so of erythorbic acid/sodium erythorbic	reciate the full scope of applicants' invention. The invention set forth in claim 1, the sole independent to pH-neutralizing solution used in the second stage washing step(s) to a preferred embodiment of buffer odium erythorbate. The invention described and enabled in the specification is not limited to the use bate buffer solutions to return the final mushroom pH to the physiological range of approximately 6.5. icidulants and even water alone were used to neutralize the effects of exposure to high pH antimicrobial
	application arose without any deceptive intention on the part of the applicant. As a named inventor, rney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent therewith.
John P. Blasko, Esq. Pamela A. Ruest, Esq. Livinia N. Jones, Esq.	(Reg. No. 31,149) (Reg. No. 40,795) (Recognized under 37 CFR § 10.9(b))
Address all telephone calls to J. P	. Blasko at telephone no. (609) 895-6639; facsimile (609) 896-1469.
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Page	Z	or	1

Docket No.	95-1514

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first inventor (given name, family name):	Robert B. Beelman
Inventor's signature:	Date:
Inventor's signature: Residence: State College, Pennsylvania	Citizenship: USA
Post Office Address: 718 Cornwall Drive, State College, Penr	nsylvania 16803
Full name of second joint inventor, if any (given name, family	name): Eric M. Duncan
Inventor's signature:	Date:
Inventor's signature:	Citizenship: USA
Post Office Address: Flat F, Arun Court Amethyst Lane, Read	ing, Berkshire England RG302EZ
Full name of third joint inventor, if any (given name, family n	ame):
Inventor's signature:	Date:
Inventor's signature:	Citizenship:
Post Office Address:	
Full name of fourth joint inventor, if any (given name, family	name):
TOTAL	
Inventor's signature:	Date:
Inventor's signature:	Citizenship:
Post Office Address:	
Full name of fifth joint inventor, if any (given name, family na	ame):
== 	
Inventor's signature:	Date:
Residence:	Citizenship:
Post Office Address:	

PTO/SB/53 (02-01)
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REISSUE APPLICATION: CONSENT OF ASSIGNEE;		Docket Number (Optional)	
STATEMENT OF NON-ASSIGNMENT 95-1514			95-1514
	,		
	ation for a reissue patent based on the or	riginal pat	tent identified below.
Name of Patentee(s)	Robert B. Beelman, Eric M.	Duncan	
Patent Number	5,919,507	Date Pa	July 6, 1999
Title of Invention	Preservation Compositions a	nd Met	hods for Mushrooms
Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)			O/SB/96)
2. Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.			
One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".			
The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.			
The Penn State The assignee(s) owning an undivided interest in said original patent is/are <u>Research Foundation</u> , and the assignee(s) consents to the accompanying application for reissue.			
Name of assignee/inventor (if not assigned)			
Signature Rad	4 J. Hus	Date	7/2/01
Typed or printed name and title of person signing for assignee (if assigned)			
Ronald J. Huss, Director, Intellectual Property Office			

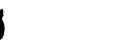
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STATEMENT CLAIMING SMALL ENTITY STATUS	Docket Number (Optional)
(37 CFR 1.9(f) & 1.27(d))NONPROFIT ORGANIZATION	95-1514
Applicant, Patentee, or Identifier: R. Beelman et al.	
Application or Patent No.:	
Filed or Issued: July 5, 2001	
Title: PRESERVATION COMPOUNDS AND METHODS FOR MUSHROOM	MS
I hereby state that I am an official empowered to act on behalf of the nonprofit organization identified be	
NAME OF NONPROFIT ORGANIZATION The Penn State Research Foundation	
ADDRESS OF NONPROFIT ORGANIZATION 304 Old Main	
University Park, PA 16802	
TYPE OF NONPROFIT ORGANIZATION:	
UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION	
■ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3))
□ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITE	
(NAME OF STATE(CITATION OF STATUTE	
WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S	.C. 501(a) and 501(c)(3))
IF LOCATED IN THE UNITED STATES OF AMERICA	
WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF S STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA	TATE OF THE UNITED
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(CITATION OF STATUTE	_)
I hereby state that the nonprofit organization identified above qualifies as a nonprofit organization purposes of paying reduced fees to the United States Patent and Trademark Office regarding the inven-	as defined in 37 CFR 1.9(e) for tion described in:
★ the specification filed herewith with title as listed above.	
 the application identified above. the patent identified above. 	
I hereby state that rights under contract or law have been conveyed to and remain with the nonprofit	organization regarding the above
identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, conci in the invention must file separate statements as to their status as small entities and that no rights to the i	ern, or organization having rights
other than the inventor, who would not qualify as an independent inventor under 37CFR 1.9(c) if that pers	on made the invention, or by any
concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organi	zation under 37 CFR 1.9(e).
Each person, concern, or organization having any rights in the invention is listed below:	
 no such person, concern, or organization exists. each such person, concern, or organization is listed below. 	
I acknowledge the duty to file, in this application or patent, notification of any change in status result	ing in loss of entitlement to small
entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee d as a small entity is no longer appropriate. (37 CFR 1.28(b))	ue after the date on which status
NAME OF PERSON SIGNING Livinia N. Jones (Recognized under 37 CFR § 10.9(b))	
Pamela A. Ruest (Reg. No. 40,795)	
TITLE IN ORGANIZATION OF PERSON SIGNING Attorney with McQuaide Blasko, Inc.	
	00
ADDRESS OF PERSON SIGNING 811 University Drive, State College, Pennsylvania 16801-66	33
SIGNATURE FAMULA Q. MUST DATE July 5, 2	001





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STATEMENT UNDER 37 CFR 3.73(b)		
Applicant/Patent Owner: Robert B. Beelman, E	Cric M. Duncan	
Application No./Patent No.: 5,919,507	Filed/Issue Date: <u>July_6,_1999</u>	
Entitled: Preservation Compositions and Mo	ethods for Mushrooms	
The Penn State Research	ersity	
(Name of Assignee) Foundation (Type of Ass	signee, e.g., corporation, partnership, university, government agency, etc.)	
states that it is:		
1. X the assignee of the entire right, title, and interest;	or	
2. an assignee of less than the entire right, title and	interest.	
The extent (by, percentage) of its ownership inter		
in the patent application/patent identified above by virtu	e of either:	
A. [x] An assignment from the inventor(s) of the patent was recorded in the United States Patent and Trawhich a copy thereof is attached.	application/patent identified above. The assignment ademark Office at Reel, Frame 0170, or for 009339	
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B. [] A chain of title from the inventor(s), of the patent assignee as shown below:		
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The undersigned (whose title is supplied below) is author	rized to act on behalf of the assignee.	
7/2/01	Ronald J. Huss	
Date	Typed or printed name Signature	
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